



Little Rock Christian Service Learning Project: Tier 1

Student Name: _____

Service Location: _____

Supervisor's Name (print): _____

Supervisors' Phone Number: _____

Date of Service: _____ Total Hours: _____

Note to Supervisor: Thank you for your sponsorship of this student. Your participation will assist the student in meeting a graduation requirement. Your signature verifies service and that the student received no compensation.

Supervisor's Signature: _____

Parent Signature: _____

In the space below, *briefly* describe the service you provided (such as what you did, how it benefited the community and what you learned from the experience).

Note to Student: a separate form must be completed for each project.